

Utah Division of Real Estate Residential Mortgage Lender BRANCH OFFICE REGISTRATION

Utah Division of Real Estate PO Box 146711 Salt Lake City, UT 84114-6711

(Please type or print clearly)		DATE	
ENTITY NAME	L	LICENSE #	
MAIN LOCATION BUSINESS PH	ONE	FAX	
BRANCH PHYSICAL ADDRESS_			
CITY	STATE	ZIP	
MAILING ADDRESS			
CITY	STATE	ZIP	
BRANCH BUSINESS PHONE		FAX	
CONTROL PERSON	CONTRO	CONTROL PERSON LICENSE#	
(REMEMBER:	ONLY ONE CONTROL PERS	ON PER ENTITY)	
NOTE: YOU WILL NEED A CERTIFICA	TE OF EXISTENCE FOR YOUR EN	NTITY FROM THE UTAH DIVISION OF	
CORPORATIONS. PLEASE ALSO INCL	UDE THE \$25 REGISTRATIO N F	EE WITH THIS FORM.	
PLEASE LIST ALL LICENSEES COND	UCTING BUSINESS AT THIS BR	ANCH LOCATION:	
NAME	LICENSE#		
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
If you have more than	10 licensees, please attach the rest of	of the list with application.	
Signature of Control Person		Date	
Title			

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